

www.seattle.gov/dpd

City of Seattle
Department of Planning and Development
Applicant Services Center
700 Fifth Avenue, Suite 2000
P. O. Box 34019 Seattle, WA 98124-4019 (206) 684-8850

Project #:	
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ASC COUNTER APPLICATION

	ASC COUNT		AFFLICATION		
NOTE: This is a request, and does not approval by DPD staff for compliance					
nspector:			Date:		
Property Address: Scope of Work:					
			Estimated Value:		
ТН	IIS SECTION TO E	3E FILL	ED IN BY APPLICANT		
Legal Description (if legal is too long, attac	ch it to this form:				
Owner/Lessee:			_ Assessor's Parcel Number	r:	
Contact Person:			– Phone:):	
Mailing Address:		City:		Zip:	
Relocation Exempt	Owner Occupie	;d 🔲	No Residential Ter	nan <u>t</u> Displace	ement 🗌
DEMO (Single Family): Has the prop	•			•	
			AND DOES NOT CONSTITU rue and correct to the best		
Applicant's Signature:			Date:		
Applicant's Name (PLEASE PRINT)					
Relationship to Project (circle one) Owner Lessee Li	icensed Architect	Lice	ensed Engineer Owner's	Agent	Contractor
Agent Statement: I certify that I am obtaining this permit.	·		lessee to act as agent on t	heir behalf fo	or the purpose of
	Agent's Signatu	ıre:			
ТН	IIS SECTION TO E	3E FILL	LED IN BY DPD STAFF		
2 sets Location Plan 2 sets Plot Plan 2 sets Elevation Plan 2 sets Floor Plan 2 sets Structural Plans 1 set Structural Calc's	Yes Yes Yes Yes Yes	No No No No No		Alterations: New: Total:	\$ \$ \$
Permit to clear violation	Yes	No			